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| Data przyjęcia: | | | | |  | | | | | | Nr zlecenia | | |  | | | | | | | | Weryfikacja | | | | |  | | |
| **Zlecający** | | | | | | | |  | | | | | | | | | | | | | | | Data: |  | | | | | |
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| Dokładna i pełna nazwa płatnika zlecenia | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | |
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| kod miejscowość | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | |
| Nr telefonu: | | |  | | | | | | | | | |  | | | | | **Dyrektor** | | | | | | | | | | | |
| Nr faksu: | | |  | | | | | | | | | |  | | | | | **Urzędu Morskiego w** | | | | | | | | | | | |
| NIP lub PESEL | | |  | | | | | | | | | |  | | | | |  | | | | | | | | | | | |
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|  | | | | | | | | | | | | | **WNIOSEK** | | | | |  | | | | | | | | | | | |
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| Proszę o zatwierdzenie poniżej wyszczególnionych planów dla statku: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Statek** / the ship: | | | | | | |  | | | | | | | | | | **Numer IMO** /Number IMO: | | | | | | | | | | |  | |
| **Sygnał wywoławczy** /call sign: | | | | | | | | | | |  | | | | **port macierzysty** / port of registry: | | | | | | | | | |  | | | | |
| **Pojemność brutto** /gross tonnage: | | | | | | | | | | | |  | | **lub**/or **dł. x szer. x wys.** / L x B x H | | | | | | | | | |  | | | | | |
| **Armator** /Owner: | | | | | |  | | | | | | | | | | | | | **Nr IMO Armatora**  Company IMO No.: | | | | | | |  | | | |
| **Pełny adres** /Full address: | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
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| Rodzaj zatwierdzonego planu | | | | | | | | na próby;  do eksploatacji;  poprawki eksploatacyjne;  inne (jakie) | | | | | | | | | | | | | | | | | | | | | |
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|  | Plan ochrony pożarowej (SOLAS II-2/15.2.4) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Plan rozmieszczenia środków i urządzeń ratunkowych (SOLAS III – 8 i 9) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Plan bezpieczeństwa (wspólny plan pożarowy i środków ratunkowych) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Rozkład alarmowy dla statku pasażerskiego (SOLAS III-37) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Plan zapobiegania rozlewom olejowym SOPEP (MARPOL Annex I – 26) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Plan zapobiegania zanieczyszczeniu szkodliwymi substancjami ciekłymi SMPEP (MARPOL Annex II – 16) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Wykaz max. prędkości zrzutu nieoczyszczonych ścieków feralnych (MARPOL Annex IV – 11.1.1) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Data odbioru: | | | |  | | | | | | Potwierdzam odbiór zatwierdzonego  i sprawdzonego dokumentu: | | | | | | | | | | | Podpis | | | | | | | |